### FORM D

#### UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SEC Mail Processing Section

FORM D

MAR 26 2008

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY							
Prefix		Serial					
	DATE R	ECEIVED					
		1					

Washington, DC 100

Name of Offering ([ ] check if this is an amendment and name has changed, and indicate change.)								
Limited partnership interests								
Filing Under (Check box(es) that apply): [ ] Rule 504 [ ] Rule 505 [X] Rule 506 [ ] Section 4(6) [ ] ULOE	I IEEE FOR IEEE SOM EIEM SOM EIEM SOM EIEM SOM EIEM							
Type of Filing: [ ] New Filing [X] Amendment	1 188 (4 88 9) 18 (4 8 8) 18 (8 8 8) 18 (8 8) 18 (8 8) 18 (8 8) 18 (8 8) 18 (8 8)							
A. BASIC IDENTIFICATION DATA								
Enter the information requested about the issuer	08044428							
Name of Issuer ([ ] check if this is an amendment and name has changed, and indicate change.)								
River Oaks Financial Fund LP								
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)							
1905 E. Wayzata Blvd., Suite 140, Wayzata, MN 55391	(952) 404-7025							
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from	Telephone Number (Including Area Code)							
Executive Offices)	PROCESSED							
	PHOCESSIED							
Brief Description of Business								
	APR 0 3 2008							
Private investment fund								
Type of Business Organization	THOMSON							
[   corporation   [X] limited partnership, already formed   [ ] other (please specify):	FINANCIAL							
[ ] business trust [ ] limited partnership, to be formed	<u> </u>							
	Month Year							
Actual or Estimated Date of Incorporation or Organization:	[0   9] [0 2] [X] Actual [ ] Estimated							
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:								
CN for Canada; FN for other foreign jurisdiction) [D   E]								

#### GENERAL INSTRUCTIONS

#### Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - · Each general and managing partner of partnership issuers.

21 1 D. / Adams J. J. D. and J. D. C. L. D. L. D. G. L. D. Director DV Consultant Managing Posture
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [ ] Director [X] General and/or Managing Partner
Full Name (Last name first, if individual) River Oaks Capital LLC
Business or Residence Address (Number and Street, City, State, Zip Code) 1905 E. Wayzata Blvd., Suite 140, Wayzata, MN 55391
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [X] Executive Officer [ ] Director [ ] General and/or Managing Partner
Full Name (Last name first, if individual) Welch, David
Business or Residence Address (Number and Street, City, State, Zip Code) 1905 E. Wayzata Blvd., Suite 140, Wayzata, MN 55391
Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) BNPPSS Lux-Benchmark Plus Partners
Business or Residence Address (Number and Street, City, State, Zip Code) 23 Avenue de la Porte – Neuve, L-2085, Luxembourg
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. INI	ORMAT	ION ABO	OUT OFF	ERING					
Has the issuer solo	l, or does the	issuer inte	nd to sell, to	non-accre	dited investo	ors in this o	ffering?		***************************************				Yes No [ ] [X
				Answer also	o in Append	lix, Column	2, if filing	under ULOI	3.				
2. What is the minim	ıum investm	ent that will	be accepted	d from any	individual?.	,,,	,			***************************************			. \$ <u>500,000</u>
* Represents initia			•	•									
capital contrib				oy tuen su	350110011	ne Genera		,,	ne anseren	on, permit	- 546501150		Yes No
3. Does the offering	permit joint	ownership (	of a single u	nit?					.,				
Enter the informat solicitation of pure registered with the of such a broker or	chasers in co SEC and/or	nnection w with a stat	ith sales of s e or states, I	securities in ist the name	the offering of the brok	g. If a perso cer or deale	on to be liste r. If more th	ed is an asso	ciated perso	on or agent o	of a broker o	or dealer	
Full Name (Last name	first, if indi	vidual)			NOT	C A DDI IC							
Business or Residence	Address (N	lumber and	Street City	State Zin		CAPPLICA	ARLE						
	•												
Name of Associated B	Broker or De	aler											
States in Which Person (Check "All States	n Listed Has	Solicited on Solicited of Solicited Solicited	r Intends to tates)	Solicit Pur	chasers							[	] All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]	
(IL) [MT]	(IN) (NE)	[IA] [NV]	(KS) [NH]	[KY] [NJ]	(LA) [NM]	[ME] [NY]	(MD) [NC]	[MA] [ND]	(MI) (OH)	[MN] [OK]	[MS] [OR]	[MO] [PA]	
[RI] Full Name (Last name	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
	inist, ii nidi	viduai)											
Business or Residence	Address (N	umber and	Street, City,	State, Zip	Code)						•		
Name of Associated B	roker or De	aler			<u> </u>								
States in Which Person													
(Check "All States	" or check i	ndividual St	ates)	••••••••••	•••••••		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************	***************************************	****************		[	] All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
(IL) [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	(LA) [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	(MO) [PA]	
[RI] Full Name (Last name	[SC]	(SD)	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
	mat, ii mat	· radary											
Business or Residence	Address (N	umber and	Street, City,	State, Zip	Code)								
Name of Associated B	roker or De	aler							·				
States in Which Person (Check "All States							***************************************					[	] All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HII)	[ID]	
(IL) [MT] (RI)	[IN] [NE] [SC]	[IA] [NV] [SD]	[KS] [NH] [TN]	[KY] [NJ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	(MD) [NC) [VA]	[MA] [ND] [WA]	[MI] [OH] [WV]	[OH] [MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero," If the transaction is an exchange offering, check this box [ ] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Offering Already Type of Security Price Sold Debt 0 Equity [ ] Common [ ] Preferred 0 ..... S 0 Convertible Securities (including warrants) \$ 103,069,437.06 <u>.....</u> \$ Infinite Limited Partnership Interests ) ...... Other (Specify Infinite \$ 103,069,437.06 Total Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors 103,069,437.06 Non-accredited Investors \$ Total (for filings under Rule 504 only) \$ ..... Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C--Question 1. Type of Dollar Amount Type of Offering Security Sold Rule 505 Regulation A Rule 504 0 Total ..... a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees 0  $\mathbf{I}$ Printing and Engraving Costs [X] 2,500 Legal Fees 20,000 [X] 7,500 Accounting Fees Engineering Fees [ ] Sales Commissions (Specify finders' fees separately) ..... 0 Other Expenses (identify) 0 ..... []

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

[X]

30,000

Total

	<ul> <li>Enter the difference between the aggregate offering price given furnished in response to Part CQuestion 4.a. This difference is the</li> </ul>	in response to Part CQuestion 1 and total e e "adjusted gross proceeds to the issuer"	expenses					\$ <u>Infinite</u>
5.	Indicate below the amount of the adjusted gross proceeds to the is If the amount for any purpose is not known, furnish an estimate payments listed must equal the adjusted gross proceeds to the issue	and check the box to the left of the estin	nate. Th	e total	hown. of the			
					Payments to Officers, Directors & Affiliates			Payments to Others
	Salaries and fees		[]	\$ _	0	_ [ ]	\$	0
	Purchase of real estate		[]	<b>\$</b> _	0	_ []	\$	0
	Purchase, rental or leasing and installation of machinery and e	quipment	[]	s _	0	_ []	\$	0
	Construction or leasing of plant buildings and facilities		[]	s _	0	_[]	\$	0
	Acquisition of other businesses (including the value of securities of another issuer parties of another parties of ano	erities involved in this offering that may be oursuant to a merger)	e []	<b>\$</b> _	0	_ [ ]	\$	0
	Repayment of indebtedness		[]	s _	0	_ []	\$	0
	Working capital		[]	s	0	_ ()	\$	0
	Other (specify): Investment in financial instruments							
			_ <sub>[ ]</sub>	\$_	0	_ []	\$	Infinite
	Column Totals		[]	\$ _	0	_ []	\$	Infinite
	Total Payments Listed (column totals added)			[X]	\$ <u>Infinite</u>			
		PROPERTY GLOSVA MILITAR						
	D.	FEDERAL SIGNATURE						
unc	e issuer has duly caused this notice to be signed by the undersigned dilertaking by the issuer to furnish to the U.S. Securities and Exchange 1-accredited investor pursuant to paragraph (b)(2) of Rule 502.	uly authorized person. If this notice is filed Commission, upon written request of its sta	under Ru ff, the inf	le 505, ormatio	the following sig on furnished by t	mature ( he issue	const r to a	tutes an ny
Riv	er Oaks Financial Fund LP	Signature David Welch		Date Mo	rch 5	, 200	8	
Name of Signer (Print or Type)  David Welch  Title of Signer (Print or Type)  Principal of River Oaks Capital LLC,			neral Pa	rtner (	of River Oaks Fi	inancia	l Fun	d LP
		a rincipal of rater Cars Capital DEC, Oc						

## ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

